



CLARK COUNTY DEPARTMENT OF BUILDING & FIRE PREVENTION

4701 W Russell Rd ~ Las Vegas, NV 89118 ~ Phone: (702) 455-7100 ~ Fax: (702) 735-0775

Over-the-Counter Fire Review Service – Letter of Intent

Website: http://www.clarkcountynv.gov/Depts/development_services/fire_prevention

Email: permits@ClarkCountyNV.gov

Fee Payment: Fee is payable in exact cash, check or money order (drawn on a US Bank in US funds), Master Card or Visa presented in person with proper ID, or an established Fire Prevention escrow account. Checks are payable to CCDB-Fire Prevention. Please note that escalating fees may apply upon completion of review. This form must be legible and all appropriate boxes check-marked. Multiple permits require separate application forms.

Submittal Date: _____ Payment Type: ☐ Cash ☐ Check ☐ Credit Card -or- Escrow Account #: _____

Service Delivery requested:

☐ Over-the-Counter (\$160 due at submittal, all plan types)

☐ 20 business-day (1x escalated fee, \$80 due at submittal, all plan types)

Code Enforcement Case No.: (If applicable) _____

Building Permit No.: (If applicable) _____

(Check one box for desired permit)

☐ **Kitchen hood Wet Chemical System Intent Letter (FDWC):** This letter permits installation of kitchen hood wet chemical systems to commence, while serving as the intent to follow-up with a revision submittal of plans for plans check approval prior to any fire inspections occurring. Contract price required.

☐ **Fire Alarm TI/Remodel (4 devices maximum) Intent Letter (FFAD):** This letter permits installation of 4 fire alarm devices to commence and the initial rough electrical inspection to occur, while serving as the intent to submit as-built plans for approval prior to final fire inspections occurring.

☐ **Tract/Production Home Sprinkler System Letter (FDSA):** For tract/production home developments using a standard model sprinkler plan, sprinkler systems for individual building lots are allowed to use a letter submittal. The letter is required to indicate the Fire Prevention permit number for the standard sprinkler plan, the address for the specific lot, the APN for the specific lot, the model of the house (labeled as shown on the standard sprinkler plan), whether the model is per plan or mirrored/flipped on the lot, the list of options for the particular lot, and the number of sprinkler heads installed in the house. Contract price required.

PERMIT INFORMATION

Plans: ☐ New ☐ Revision ☐ Correction Application # (If applicable): _____

Note: The original application number must be provided if this plan submittal is a revision or a correction.

Municipal Project/Property: ☐ Yes ☐ No APN: _____

Property/Venue Address: _____ Bldg.-Suite#: _____

Major Property/Venue Name: _____
(i.e.: Name of development, building, project, hotel/casino, or other identifying information)

Sub-Property/Venue Location: _____
(i.e.: Name of business, shop, project, ballroom, hall, parking lot, or other identifying information)

APPLICATION INFORMATION

Submitting Company Name: _____

Mailing Address: _____ Bldg.-Suite #: _____

City, State, Country, Zip Code: _____

Company Email Address: _____

Company Phone #: _____ Company Fax #: _____

Applicant Phone #: _____ Ext #: _____ Fax #: _____

Applicant Email Address: _____

Inspection Contact Name: _____ Cell Phone #: _____

Inspection Contact Email Address: _____

Applicant Name and Title

Applicant Signature